PTORBACI (12,04)

Approved for use though TII (2005, OHD 9051-6012

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OHLERCE

PERMITTER TO TREAMISM OHD (2. U.S. DEPARTMENT OF COMMERCE

B B COROCO ON THOUGH OH OHD (2. U.S. DEPARTMENT)

OHLERCE STATE OHD (2. U.S. DEPARTMENT)

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-815							13591641		
APPLICATION AS FILED - PART I (Cotumn 1) (Column 2)			•	SMALL ENTITY		OR F	OTHER THAN SMALL ENTITY		
	HUNDOR FELED	HUMBER EX	TRA	RATE (1)	FEE (1)	! !.	RATE(I)	4	
FOR BASIC FEE	. NA	. NA		NVA		.	HAY	700	
SEARCH FEE	NVA	NA		NVA	· ·	1 1	14/4		
EXAMINATION FEE	NA	N/A.		, N/A		1 1	H/A	400	
TOTAL CLAULS	ศากนร 20. •			X =		,on	x 250.	300	
HOEPEHOENT CLAIMS	minus 3 =	•	•	х - с		1 1	x 50.=	60	
P7 CAR 1.10(10)	If the specification and	drawings exce	sed 100.			. "			
APPLICATION SIZE FEG (37 CFR 1.16(+))	streets of paper, the application stre fee due to \$250 (\$125 for small entity) for each additional 50 streets or fraction thereof. See						300	200	
	35 U.S.C. 41(a)(1)(G	and 37 CFR 1	.16(s).	· N/A	1	1	N/A.	13.5	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160)					1.	-	TOTAL	1656	
· If the difference in colu	mn 1 is less than sero, onter	"0" In oolumn 2.		TOTAL	·	<u>.</u>		1	
« APPLIC	ATION AS AMENDED	PART II					OTHE	R THAN	
	(Column 1)	(Cohmn 2)	(Column 3)	swu	ЕИПТҮ	. OR 		L EKILLA	
× i	CLAINS REMAINING AFTER	REVIOUSLY	PRESENT EXTRA	RATE (1)	ADDI- TIONAL FEE (T		RATE (1)	LEE (2)	
Total	AMENDMENT MONEY	PAID FOR	• /	×		Z OR	x		
D interested	Mirus	TU I	-	× ·	-	Z: or	×		
Z DICHERTON STR	Fee (37 CFR 1.16(e))		/		1-/	\dashv		/	
HUST LIKEZDALVIJOH OE MITTATE DELENDENT CIVIM (D) CLU 1'10(D)				X138	_/_	OR	LATOT		
7 100.				TOTAL ADOL FE	i (or		L	
1.		(Column 2)	(Column 3)						
m m	(Column 1) CLAIMS REMAINING AFTER	HIGHEST HUMBER PREVIOUSLY	PRESENT	(V,TE (I	ADD TION	AL	RATE () Anoi: Tichial FEE (S)	
L ZU Total	WINDHENT WINDS	PAID FOR	=	×	=	<u>1</u>	R X	<u>- 57</u>) (3)	
Total CECENTIMES	tunib)	***		\ \ ×			ır ×	*	
C today	- to (27 CFR 1.16(s))	<u> </u>							
Application Sim Fee (37 CFR 1.16(31)): FIRST PRESENTATION OF MILTIPLE DEPENDENT CLAIM (37 CFR 1.16(3))				NIN			OR IVA		
FIRST PRESONATION OF THE THE				LATOTAL .	GE		OR ADDILFI	E.E	
	rotions 1 to lose than the ent	ry in column 2, w	ritic or in colum	in 3.	L		•		

^{*} If the entry in column 1 is loss than the entry in column 2, write "0" in column 3.

* If the Tilghest Number Previously Paid For! IN THIS SPACE is less than 3, enter "2".

** If the Tilghest Number Previously Paid For! IN THIS SPACE is less than 3, enter "3".

** If the Tilghest Number Previously Paid For! IN THIS SPACE is less than 3, enter "3".

The Tilghest Number Previously Paid For! Total or independently is the highest number found in the appropriate box in column 1.

The Tilghest Number Previously Paid For! Total or independently is to highest number found in the appropriate box in column 1.

The Tilghest Number Previously Paid For! Total or independently is to highest number found in the appropriate box in column 1.

The Tilghest Number Previously Paid For! Total or independently is to highest number found in the appropriate which is to file (and by the Tilghest Number Previously Paid For Ind.) The independent in the appropriate of the complete application form to the USPTO. Then will vary depending upon the Individual costs. Any cointing application, preparing, and cummiting the complete application form to the USPTO. Then will vary depending upon the Individual costs. Any cointing application for the property of the Complete of the form and/or suggestions by reducing this burdan, chould be sent to, the Chief Industrial Officer, U.S. Paid Trademark Office, U.G. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDNESS. EEND TO: Commits along the form and/or the form call the form call LAODPTO-9199 and select option 2.